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to currently available IOLs are approved by the FDA for use in labeling and advertising.

- (3) The IOL is not described by an active or expired class of new technology IOLs; that is, it does not share a predominant, class-defining characteristic associated with improved clinical outcomes with members of an active or expired class.
- (4) Evidence demonstrates that use of the IOL results in measurable, clinically meaningful, improved outcomes in comparison with use of currently available IOLs. Superior outcomes include:
- (i) Reduced risk of intraoperative or postoperative complication or trauma;
- (ii) Accelerated postoperative recovery;
 - (iii) Reduced induced astigmatism;
- (iv) Improved postoperative visual acuity;
 - (v) More stable postoperative vision;
- (vi) Other comparable clinical advantages.
- (b) CMS determination of eligibility for payment adjustment. CMS reviews the information submitted with a completed request for review, public comments submitted timely, and other pertinent information and makes a determination as follows:
- (1) The IOL is eligible for a payment adjustment as a member of a new class of new technology IOLs.
- (2) The IOL is a member of an active class of new technology IOLs and is eligible for a payment adjustment for the remainder of the period established for that class.
- (3) The IOL does not meet the criteria for designation as a new technology IOL and a payment adjustment is not appropriate.

§416.200 Payment adjustment.

- (a) CMS establishes the amount of the payment adjustment for classes of new technology IOLs through proposed and final rulemaking in connection with ASC facility services.
- (b) CMS adjusts the payment for insertion of an IOL approved as belonging to a class of new technology IOLs for the 5-year period of time established for that class.
- (c) Upon expiration of the 5-year period of the payment adjustment, pay-

ment reverts to the standard rate for IOL insertion procedures performed in ASCs.

(d) ASCs that furnish an IOL designated by CMS as belonging to a class of new technology IOLs must submit claims using billing codes specified by CMS to receive the new technology IOL payment adjustment.

PART 417—HEALTH MAINTENANCE ORGANIZATIONS, COMPETITIVE MEDICAL PLANS, AND HEALTH CARE PREPAYMENT PLANS

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